

# **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

404

REGISTRY OF ELECTION FINANCE JAMES ROBERTSON PARKWAY, SUITE 161 NASHVILLE, TN 37243-1360 (615) 741-7959		and Local Can -Candidate Con		
1. DATE OF REPORT	2.A. NAME OF CANDID	ATE OR COMMITTEE		
January 31 1997	CITIZENS F	or ElizaBerit	AKINS	
2.B. IF COMMITTEE, NAME OF CAND	IDATE		3. ELECTION DATE	
ELIZABETH T	- AKINS		11-42 9	. 6
4.A. CAMPAIGN ADDRESS				122
Street or Rural Route	City	State	Zip Code	Phone 423
	GNAL MOUNTA	in Th	37377	886-1562
4.B. CANDIDATE'S HOME ADDRESS ( Street or Rural Route	(if different than 4.A.)	State	Zip Code	Phone 423
6321 Forest PARK	Danie Chique		37377	886-1328
5. OFFICE SOUGHT (include district no		6. NAME OF POLITICAL TR		
MAYOR	on approadicy	. /	PRIEN	,
7. CATEGORY OF REPORT			-OCEN	
PRE-PRIMARY □ POST-PRIMA	ARY D PRE-GENERA	L D POST-GENERAL D	SUPPLEMENTAL	AMENDED
8.A. BEGINNING DATE OF REPORTIN		8.B. ENDING DATE OF REP		, and the co
	IG PERIOD	12-31-96	ONTING PENIOD	
10-27-9C 9. (Check one)				
less AND expenditure  B. 12 This campaign is requ	es total \$1,000 or less fo uired to file a detailed fina	sure because contributions (in r this reporting period. (Comp ancial disclosure because conti nore than \$1,000 for this repor	lete items 12d., 12e., an ributions (including in-kin	nd 12f.)
is an accurate accounting of campa the Campaign Financial Disclosure the personal financial benefit of the signature of candidate	Act. Additionally, I/we sv	vear or affirm that no campaig	n contributions have be ned by the federal interna-	en expended for
11. SWORN TO AND SUBSCRIBED B	BEFORE ME IN THE		UBSCRIBED BEFORE N	ME IN THE
COUNTY OF Framilton		_ COUNTY OF	Namilton	
AND THE STATE OF Denn	1211	_ AND THE STATE OF	Tenness	a
7 7 1		~	7.1	67
THIS 3 BAY OF July.	19 97	_ THIS DAY OF	Telly	19 2
Dette S. /	inne	Dette	L. Sunn	els :
notary public	1 /	My Commit	ffotary public	
My Commission Expires Me	y 20, 2000	wy Commission	Expires May 20, 200	0 = 3
date commission e.			commission expires	2 30
Notary Seal			Notary Seal	To have
The Total Control of the Control of				
10 00000000				
12. SUMMARY	_		1021 26	
a. BALANCE ON HAND LAST REPOR			2 00	
b. TOTAL RECEIPTS THIS PERIOD.			200 -	
c. TOTAL DISBURSEMENTS THIS P	'ERIOD	\$_	321	-
d. BALANCE ON HAND (12a. plus 12	b. minus 12c.)		\$	0
e. TOTAL LOANS OUTSTANDING			\$	0

f. TOTAL OBLIGATIONS OUTSTANDING.....\$\_

0



#### **SUMMARY PAGE**

3. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PE	ERIO
CITIZENS For ElizaBeth AICINS	FROM: 10-27-96 TO12-31	
RECEIPTS	Mom/6-61-46 1012-31	7
CONTRIBUTIONS (other than loans and interest)     a. Unitemized Contributions (\$100 or less from each source this period)	\$	
b. Itemized Contributions (over \$100 from each source this period)	\$	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15a. and 15b.)	\$	_
6. LOANS RECEIVED THIS REPORTING PERIOD	\$6	
7. INTEREST RECEIVED THIS REPORTING PERIOD	s 0	50
8. TOTAL RECEIPTS (add 15c., 16., and 17.) (must be shown in item 12b.)	<u>\$ 300</u>	
PISBURSEMENTS  19. EXPENDITURES (other than loan payments) a. Expenditures (\$100 or less each payee this period)(must be listed by category - e.g.	g. printing, postage, gasoline)	
Signs \$ 33 67		
Reception (enterer) \$ 5000		
\$		
\$		
\$		
\$		
ė.		
\$		
\$		
Total of Expenditures (\$100 or less each payee)	\$ 83 67	
b. Itemized Campaign Expenditures (Over \$100 each payee this period)	\$	
c. Itemized Other Expenditures (Over \$100 each payee this period)	\$ _237	
d. TOTAL EXPENDITURES (other than loan repayments)(add 19a., 19b., and 19c.)		
		69
O. LOAN REPAYMENTS MADE THIS PERIOD	\$ 7000	zL
21. TOTAL DISBURSEMENTS (add 19d.and 20.) (must be shown in item 12c.)	\$ 1341	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$	
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ Z50	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22a. and 22b.)	\$250	
23. LOANS LOANS OUTSTANDING (must be shown in item 12e.)		
A. OBLIGATIONS a. Unitemized Obligations Outstanding (\$100 or less each)	\$	
b. Itemized Obligations Outstanding (Over \$100 each)	\$	
Di italiane deligatione determining (over proc sacri)		

SS-1133 RDA 1159 Page 2 of S

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTION - CANDIDATE

<ol> <li>NAME OF CANDIDATE OR COMMITTE</li> </ol>	E			2. REPORT COVERING	THE PERIOD
CITIZENS For a	2/12	ABOU A	1C, wl	FROM: 10-27-9C	Amount
3. TOTAL ITEMIZED IN-KIND CONTR	RIBUTIO	NS FROM PRECEI	DING PAGE (enter \$0 if first itemize	d page)	250 =
4. COMPLETE THE APPROPRIATE ITEMS FO					ributor during the period)
First Name WAlter	Middle N	ame )	In-Kind Contribution Received For: ☐ Primary Election ☐ Ge	neral Election	Value of In-Kind Contribution
ast Name/Organization Name Moore Jr			□ Other Election (Specify):	14408	2500
701 Pine Street	-		Date of In-Kind Contribution  Covernor 4	1996	Aggregate this Election
ast Name/Organization Name MOOVE Jr  Address 701 PINE STEEL  Sity SIGNAL MONTAN	State	Zip Code 3 7377	Description of In-Kind Contribution  BANNET FLY		
irst Neme	Middle N	ame	In-Kind Contribution Received For:	neral Election	Value of In-Kind Contribution
ast Name/Organization Name			☐ Other Election (Specify):		
Address			Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution		
First Name	Middle N	ame	In-Kind Contribution Received For:  Primary Election	neral Election	Value of In-Kind Contribution
ast Name/Organization Name				RICIAI LICUIOII	
Address	ddmss		Other Election (Specify):  Date of In-Kind Contribution	Other Election (Specify):  Date of In-Kind Contribution	
City	State	Zip Code	Description of In-Kind Contribution		
First Name	Middle N	ame	In-Kind Contribution Received For:  Primary Election	eneral Election	Value of In-Kind Contribution
ast Name/Organization Name					
Address			☐ Other Election (Specify):  Date of In-Kind Contribution		Aggregate this Election
Oty	State	Zip Code	Description of In-Kind Contribution		
First Name	Middle N	ame	In-Kind Contribution Received For:		Value of In-Kind Contribution
ast Name/Organization Name			☐ Primary Election ☐ G	☐ Primary Election ☐ General Election	
and interior or generation interior		Other Election (Specify):			
			Date of In-Kind Contribution		Aggregate this Election
Address					
	State	Zip Code	Description of In-Kind Contribution		
Oily	State Middle N		In-Kind Contribution Received For:	eneral Election	Value of In-Kind Contribution
City First Name			In-Kind Contribution Received For:	eneral Election	Value of In-Kind Contribution
Address  City  First Name  Last Name/Organization Name  Address			In-Kind Contribution Received For:	eneral Election	Value of In-Kind Contribution
City First Name Last Name/Organization Name			In-Kind Contribution Received For: ☐ Primary Election ☐ G	eneral Election	
City First Name Last Name/Organization Name Address	Middle N	lame	In-Kind Contribution Received For:  ☐ Primary Election ☐ G  ☐ Other Election (Specify):  Date of In-Kind Contribution	eneral Election	



### ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMUTTED	E _			2. REPORT COV	ERING THE PERIOD
1. NAME OF CANDIDATE OR COMMITTEE  2. REPORT COV.  FROM OF LIZABETH ACCOUNTS  FROM OF LIZABETH ACCOUNTS  1. NAME OF CANDIDATE OR COMMITTEE  2. REPORT COV.			TO/2-31-96		
	,				Amount
<ol> <li>TOTAL ITEMIZED CAMPAIGN EXP</li> </ol>	ENDITU	RES FROM PRECE	DING PAGE (enter \$0 if first itemized page)	ge)	
	SFORE	ACH ITEMIZED CAMPA	IGN EXPENDITURE (expenditures totaling mo	re than \$100 to any pay	yee during the period)
First Name	Middle N	lame	Purpose of Expenditure		Amount of Expenditure
2/12/13erh Lest Name/Business Name			- 00		- 00
O'CONNOT			CATERER		5000
Address	0				Date of Expenditure
Slib Old Chestant 1	6109-	TROMP			
SILO Od Chester 1	State	Zip Code			12-08-96
DIGNAL PROUNTON			10 15 0		
First Name  E113 Lbert	Middle N	ame	Purpose of Expenditure		Amount of Expenditure
	1				237 58
O CONNOT			foor for Recent.	ion	237
Address	1	1			Date of Expenditure
5110 Old CHESTUT 1	(109	e //or-			
SILD OLD COLESTAT 1 SIENTE MOUNTAIN -	State	Zip Code			12.08-96
First Name	Middle N		Purpose of Expenditure		Amount of Expenditure
2/12/13/14	MIDDLE	eme	Purpose of Experiorities		Amount or Experiorities
Last Mana Phalasas Mana	<u> </u>				47
AKINS			Signs		33 67
AKINS Address	1				Date of Expenditure
6321 Forur	1 Ans	Drive			
City Signer Mountain	Slate	Zip Code 37377			11-17-96
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			-		
Address					Date of Expenditure
City	State	Zip Code			
First Name	Middle N	lame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			_		
Cost Harris Diagraps Harris					
Address					Date of Expenditure
City	State	Zip Code			
	-				
First Name	Middle N	lame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			-		
***					
Address					Date of Expenditure
Address					Date of Expenditure
Address	State	Zip Code			Date of Expenditure
City					
5. TOTAL ITEMIZED CAMPAIGN EXPEN	DITURES				
TOTAL ITEMIZED CAMPAIGN EXPENI (Carry forward to item 3. of next page if ad	DITURES ditional pa	ges of this form are used.)	itam 10h of summan 1		
5. TOTAL ITEMIZED CAMPAIGN EXPEN	DITURES ditional pa	ges of this form are used.)	item 19b. of summary.)		Date of Expenditure



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## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE  CITIZENS FOR ZIIZEBETR AKINS 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source)				FROM: 10-27-92 TO: 12-31-96		
				00 from any source	e during the period)	
Complete the Following for the Source				CRE, CARDO CO. C.		
First Name	Middle N	ame	Outstanding Loan Balance	Loans	Loan	Outstanding Loan Balance
F72A ** IS Lest Name/Organization Name	1	-	(Beginning of Period)	Received	Payments	(End of Period)
			1000=		1006	0
AKINS Address			Loan Received For:			
6321 Forest	Par	DRIVE	Louis reconstruction of			
G321 Forest City Signal MTN. (WALL	State  State	Zip Code 37377	Primary Election		Other Elec	ction (Specify):
List All Endorsers or Guarantors for Above Lo			)			
First Name	Middle N	ame	First Name		Middle Nan	ne
Last Name/Organization Name			Last Name/Organization Na	nme		
Address			Address			
City	State	Zip Code	aty		State	Zip Code
Amount Guaranteed Outstanding			Amount Guaranteed Outsta	anding		
First Name	Middle N	ame	First Name Middle Name		ne	
Last Name/Organization Name	ast Name/Organization Name		Last Name/Organization Name			
Address			Address			
	Ta					
City	State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding			Amount Guaranteed Outsta	ending		
First Name	Middle Name		First Name Middle Name			ne
Last Name/Organization Name			Last Name/Organization No	ame		
Address			Address	•		
City	State	Zip Code	City		State	Zip Code
1			Amount Guaranteed Outsti	nodena		
Amount Guaranteed Outstanding			Allibuit Guarditeeu Guisti	anung		
First Name Middle Name			First Name Middle Name			me
Last Name/Organization Name		Last Name/Organization Name				
Address		Address				
City	State	Zip Code	City	71 1	State	Zip Code
Account Comments of Contribution						
Amount Guaranteed Outstanding			Amount Guaranteed Outst	anuing		
4. Totals for all Loans (complet			Outstanding Loan Balance	Loans	Loan	Outstanding Loan Balan
(Total loans received should also be shown			(Beginning of Period)	Received	Payments	(End of Period)
(Total loan payments should also be shown (Total outstanding loan balance should also			1000		1000	0
					, ,	